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 PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # F9400001827 (4)

2. Principal Place of Business 2a. Mailing Address 2a. Mailing Address 4. FEI Number Applied For 21	WALT DISNEY PICTURES AND TELEVISION, INC. Principal Place of Business Mailing Address 500 SOUTH BUENA VISTA STREET BURBANK CA 91521 BURBANK CA 91521-0001 US					
2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Soil 5, April 19, 6th 500 S. Buena Vista St. 95-384209 Not Applicable Not Applicable Suito, April 19, 6th 501 S. Buena Vista St. 95-384209 Significant State Suito, April 19, 6th 501 S. Buena Vista St. 95-384209 Significant State Suito, April 19, 6th 501 S. Buena Vista St. Suito, April 19, 6th 501 S. Buena Vista St. Suito, April 19, 6th 501 S. Buena Vista St. Suito, April 19, 6th 501 S. Buena Vista St. Suito, April 19, 6th 501 S. Buena Vista St. Suito, April 19, 6th 501 S. Buena Vista St. Suito, April 19, 6th 501 S. Buena Vista St. Suito, April 19, 6th 501 S. Buena Vista Country Suito, April 19, 6th 501 S. Buena Vista Country Suito, April 19, 6th 501 S. Buena Vista DRIVE, 4TH FLOOR NORTH LAKE BUENA VISTA FL 32830 Suito, April 19, 6th 501 S. Buena Vista DRIVE, 4TH FLOOR NORTH LAKE BUENA VISTA DRIVE, 4TH FLOOR NORTH LAKE BUENA VISTA DRIVE, 4TH FLOOR NORTH LAKE BUENA VISTA FL 32830 Suito, April 19, 6th 501 S. Buena Vista DRIVE, 4TH FLOOR NORTH LAKE BUENA VISTA DRIVE, 4TH FLOOR Suito, and account the obligations of, Socion 607-5055, Florido Statules, the above-named corporation submits this statement for the purpose of chenging its registered appril 19, or both, in the State of Florido Statules, the above-named corporation submits this statement for the purpose of chenging its registered office or registered appril 19 to bend of directors. Thereby accept the appointment as registered softice or registered appril 19 to bend of directors. Thereby accept the appointment as registered appril 19 to bend of directors. Thereby accept the appointment as registered appril 19 to bend of directors. Thereby accept the appointment as registered appril 19 to be corporation's board of directors. Thereby accept the appointment as registered appril 19 to be					· ·	3a. Date of Last Report
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10, Name and Address of New Registered Agent 10, Name and Address of New Registered Agent		Country	Zip	Country		
IOPPOLO, FRANK S 1375 BEUNA VISTA DRIVE, 4TH FLOOR NORTH LAKE BUENA VISTA FL 32830 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 85 Zip C	24			30 USA		
13.75 BEUNA VISTA DRIVE, 4TH FLOOR NORTH LAKE BURNA VISTA FL 32830 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and name of the provisions of Sections 607.0502 and 607.1508. Florida Statutes agent, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes agent, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes agent, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes SIGNATURE Signature injected agent age			nt Hegistered Agent	R1 Nome	10. Name and Address of New Ho	egistered Agent
LAKE BUENA VISTA FL 32830 83 84			A	VI Name		
R3			OUR NORTH	82 Street A	ddress (P.O. Box Number is Not Accepta	ble)
The figuration is to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agont, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered signed. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 THE CD	LAK	CE BUENA VISTA FL 32830		R3		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. Familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature typed or provided renie of registered agent agent agent. It is provided renie of registered agent agent. It is provided renie of registered agent agent agent. It is provided renie of registered agent age				""		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, both and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, lysted or prointed name of registered agent and alle if applicable. (NOTE. Registered Agent signature required when reinstating). DATE 12. OFFICERS AND DIRECTORS. 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. THE CD. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. THE STATE SOS SOUTH BUENA VISTA STREET. 1.3 STREET ADDRESS. BURBANK CA. 1.4 CITY-ST-ZIP. 1.5 CITY-ST-ZIP. 1.5 SOS SOUTH BUENA VISTA STREET. 1.5 SITREET 1.5 SITREET 1.5 SOS SOUTH BUENA VISTA STREET. 1.5 SITREET 1.5 SOS SOUTH BUENA VISTA STREET. 1.5 SITREET 1.5 SOS SOUTH BUENA VISTA STREET. 1.5 SITREET 1.5 SITREET 1.5 SOS SOUTH BUENA VISTA STREET. 1.5 SITREET 1.5 SITREET 1.5 SITREET 1.5 SITREET 1				84 City		85 Zip Code
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14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

FILED

Apr 16 1997 8:00am

Secretary of State